

AMENDED IN SENATE AUGUST 7, 2006
AMENDED IN ASSEMBLY MAY 26, 2006
AMENDED IN ASSEMBLY MAY 11, 2006
AMENDED IN ASSEMBLY MAY 8, 2006
AMENDED IN ASSEMBLY MAY 3, 2006
AMENDED IN ASSEMBLY APRIL 6, 2006

CALIFORNIA LEGISLATURE—2005–06 REGULAR SESSION

ASSEMBLY BILL

No. 2651

Introduced by Assembly Member Jones

February 24, 2006

An act to amend Sections 124116.5, 124118, 124118.5, and 124119 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2651, as amended, Jones. Newborns: hearing screening.

The existing Newborn and Infant Hearing Screening, Tracking, and Intervention Act requires that every California Children's Services (CCS)-approved general acute care hospital with licensed perinatal services offer all parents of a newborn, upon birth admission, a hearing screening test for the identification of hearing loss, using protocols approved by the State Department of Health Services or its designee.

This bill would, instead, require that this hearing screening be offered to every newborn, *upon birth admission, or in any event prior to hospital discharge*, by every general acute care hospital with licensed perinatal services, and would make related changes to the

program. It would permit certain hospitals to contract for the provision of this service.

This bill would provide that its provisions shall become operative on January 1, 2008.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Section 124116.5 of the Health and Safety Code
2 is amended to read:

3 124116.5. (a) (1) Every general acute care hospital with
4 licensed perinatal services in this state shall administer to every
5 newborn, upon birth admission *or in any event prior to hospital*
6 *discharge*, a hearing screening test for the identification of
7 hearing loss, using protocols approved by the department or its
8 designee.

9 (2) In order to meet the department's certification criteria, a
10 general acute care hospital shall be responsible for developing a
11 screening program that provides competent hearing screening,
12 utilizes appropriate staff and equipment for administering the
13 testing, completes the testing prior to the newborn's discharge
14 from a newborn nursery unit, refers infants with abnormal
15 screening results, maintains and reports data as required by the
16 department, and provides physician and family-parent education.

17 (b) A hearing screening test provided for pursuant to
18 subdivision (a) shall be performed by a licensed physician,
19 licensed registered nurse, licensed audiologist, or an
20 appropriately trained individual who is supervised in the
21 performance of the test by a licensed health care professional.

22 (c) Every general acute care hospital that has licensed
23 perinatal services that provides care in less than 100 births
24 annually shall, if it does not directly provide a hearing screening
25 test, enter into an agreement with an outpatient infant hearing
26 screening provider certified by the department to provide hearing
27 screening tests.

28 (d) This section shall not apply to any newborn whose parent
29 or guardian objects to the test on the grounds that the test is in
30 violation of his or her beliefs.

1 SEC. 2. Section 124118 of the Health and Safety Code is
2 amended to read:

3 124118. The department or its designee shall provide every
4 general acute care hospital that has licensed perinatal services, or
5 neonatal intensive care unit (NICU), as specified in Section
6 123975, written information on the current and most effective
7 means available to screen the hearing of newborns and infants,
8 and shall provide technical assistance and consultation to these
9 hospitals in developing a system of screening each newborn and
10 infant receiving care at the facility. The information shall also
11 include the mechanism for referral of newborns and infants with
12 abnormal test results.

13 SEC. 3. Section 124118.5 of the Health and Safety Code is
14 amended to read:

15 124118.5. (a) The department shall establish a system of
16 early hearing detection and intervention centers that shall provide
17 technical assistance and consultation to hospitals in the startup
18 and ongoing implementation of a facility screening program and
19 followup system.

20 (b) The early hearing detection and intervention centers shall
21 be chosen by the department according to standards and criteria
22 developed by the California Children's Services Program (CCS).
23 Each center shall be responsible for a separate geographic
24 catchment area as determined by the program.

25 (c) Each center shall be required to develop a system that shall
26 provide outreach and education to hospitals in its catchment area,
27 approve hospitals on behalf of the department for participation as
28 newborn hearing screening providers, maintain a database of all
29 newborns and infants screened in the catchment area, ensure
30 appropriate followup for newborns and infants with an abnormal
31 screen including diagnostic evaluation and referral to
32 intervention service programs if the newborn or infant is found to
33 have a hearing loss, and provide coordination with the CCS and
34 local early intervention programs as defined in Title 14
35 (commencing with Section 95000) of the Government Code.

36 SEC. 4. Section 124119 of the Health and Safety Code is
37 amended to read:

38 124119. (a) The department shall develop and implement a
39 reporting and tracking system for newborns and infants tested for
40 hearing loss.

1 (b) The system shall provide the department with information
2 and data to effectively plan, establish, monitor, and evaluate the
3 Newborn and Infant Hearing Screening, Tracking and
4 Intervention Program, including the screening and followup
5 components, as well as the comprehensive system of services for
6 newborns and infants who are deaf or hard-of-hearing and their
7 families.

8 (c) Every general acute care hospital with licensed perinatal
9 services, or NICU in this state shall report to the department or
10 the department's designee information as specified by the
11 department to be included in the department's reporting and
12 tracking system.

13 (d) All providers of audiological followup and diagnostic
14 services provided under this article shall report to the department
15 or the department's designee information as specified by the
16 department to be included in the department's reporting and
17 tracking system.

18 (e) The information compiled and maintained in the tracking
19 system shall be kept confidential in accordance with Chapter 5
20 (commencing with Section 10850) of Part 1 of Division 9 of the
21 Welfare and Institutions Code, the Information Practices Act of
22 1977 (Chapter 1 (commencing with Section 1798) of Title 1.8 of
23 Part 4 of Division 3 of the Civil Code), and the applicable
24 requirements and provisions of Part C of the federal Individuals
25 with Disabilities Education Act (20 U.S.C. Sec. 1475 et seq.).

26 (f) Data collected by the tracking system obtained directly
27 from the medical records of the newborn or infant shall be for the
28 confidential use of the department and for the persons or public
29 or private entities that the department determines are necessary to
30 carry out the intent of the reporting and tracking system.

31 (g) A health facility, clinical laboratory, audiologist,
32 physician, registered nurse, or any other officer or employee of a
33 health facility or laboratory or employee of an audiologist or
34 physician, shall not be criminally or civilly liable for furnishing
35 information to the department or its designee pursuant to the
36 requirements of this section.

37 SEC. 5. Sections 1 to 4, inclusive, of this act shall become
38 operative on January 1, 2008.

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